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CONFIRMATION NO. 8144

<b>SERIAL NUMBER</b> 10/549,617	<b>FILING OR 371(c) DATE</b> 09/20/2005 <b>RULE</b>	<b>CLASS</b> 128	<b>GROUP ART UNIT</b> 3743	<b>ATTORNEY DOCKET NO.</b> 0119/0047	
<b>APPLICANTS</b> Thomas Gostelow, Springhead, UNITED KINGDOM; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/GB04/01707 04/21/2004 <b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 0309389.5 04/25/2003					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 10	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> Law Office of Louis Woo 717 N. Fayette Street Alexandria ,VA 22314					
<b>TITLE</b> Tracheostomy device					
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		